

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 18 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)

Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Leann Moccia, Chris Herr

PLEASE PRINT

Legislative	Solutions, L.L.C			
(Name of partner	rship, firm or corpo	ration)		
P.O. Box 107	724	Bedford	NH	03110
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
) 603-986-9145	()		e-mail dbeek@a	aol.com
(Telephone)	\ /	(Fax)	v man v	
III. This statement covers: (Cheeportable expense transaction				nay file a separate report
All reportable transactions oc	curring in the mo	nths prior to the re	porting date relative to t	the following client:
P	siotechnology In	novation Organi	zation	
			t Registration Form)	
<u>OR</u>	11	Ž	,	
All reportable transactions by unrelated to any particular client.		uding the lobbyist	s family), or the lobbying	ng firm listed below which
<u> </u>	, 2018 🕱	2/21/10	July 25, 2018	0
•	e of registration to	3/31/18 ac	tivity from 4/1/18 to 6/30/1	o
	31, 2018	ac	January 30, 2019 tivity from 10/1/18 to 12/3	1/18
V. There have been no fees r If this box is checked, complete ju Concord, NH 03301.				
/I. Check if additional reports	are attached:			
If you have received fees or		s, you must file A	ddendum A – Fees and F	Expenses
If you have paid an honorarion	um or reimbursed	expenses, you mu	st file Addendum B – R	eport of Honorariums or
If you, your firm, or your fan	nily has made pol	itical contributions	s, you must file Addend	um C- Political Contribut
Sworn Statement/Affirmation I have read RSA 15, RSA 15-B,	RSA 14-C and RS	SA 664 and hereby	swear or affirm that the	foregoing information is
and complete to the best of my ki	nowledge and beli	ief.		
(2) V///			April 9, 2018	
(Signature of lobbyist)			(Da	ate)
Debra Vanderbeek				
(Print Name of lobbyist)				

E A S E P R T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses

	Addendum A (RSA Chapter 15:6)		
I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Kar	outas, Leann Moccia, Chris Herr		
II. Name of lobbyist's partnership, firm or corporation, if any:			
Legislative Solutions, L.L.C.			
(Name of partnership, firm or corporation)			
III. Name of Client Biotechnology Innovation Organization	Date April 9, 2018		
IV. Fees Received Indicate the gross amount of all fees received from the client identified about to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The reduced by any expenses:	ent relations, or public relations services		
a) Total of all fees received in this reporting period	a) \$ 22,500.00		
b) Total of all fees received this calendar year, prior to this reporting perio (This should equal the total of all prior monthly reports for this calendar			
c) Total of all fees received to date (Add lines a and b)	c) \$ 22,500.00		
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>		
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to fees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report expenses are to be reported in one of three categories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for exar lunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lob (c) an itemized statement of each individual expenditure made during this reany purpose not covered by (a) (for example: purchase of a meal with veremonial object to be given to the subject of lobbying with a value gree restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported a) Total aggregate expenses for this reporting period for salaries, benefits,	th client and if expenditures are made by t may be filed for the lobbyist(s)/firm. the aggregate total of all expenses paid expenses; (b) the aggregate total of all nple: meals purchased during a business less than \$10 that is given to the person bied with a value of \$25.00 or less); and exporting period of greater than \$25.00 for alue of greater than \$25, purchase of a cater than \$25, but not greater than \$50, ms, expense reimbursement, or political		

support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 22,300.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 22,500.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0</u>
f) Total of all expenses year to date	f) \$ 22,500.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
SX/WINE	April 9, 2018
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative Solution	ns, L.L.C.	
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to	any
particular client):	Biotechnology Inn	ovation Organization		
Date of Report (check	one):			
April 25, 2018 💆	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □	
			nd Expenses described above, umber of Addendum forms be	
Addendum A	s).			
Addendum B(s).			
Addendum C(s).			
complete to the best of	f my knowledge and be	lief.	nt and each Addendum is true	and
(Signature of lobbyist)	() 8		(Date)	
Robert Clegg				
(Print Name of lobbyi	st)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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Name of Lobbying partn	ership, firm, or corpo	oration: Legislative Solution	ns, L.L.C.
Name of Client (leave b)	lank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):	Biotechnology Inno	ovation Organization	
Date of Report (check o	ne):		
April 25, 2018 🕱	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
I have read RSA 15, RS the following Addendun submitted):	A 15-B, RSA 664, then submitted with the	ne Statement of Income an at Statement (insert the nu	nd Expenses described above, and imber of Addendum forms being
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm complete to the best of m			nt and each Addendum is true and
		April	9, 2018
(Signature of lobbyist)			(Date)
Periklis Karoutas (Print Name of lobbyist)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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Name of Client (leave bl	ank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):	Biotechnology Inno	ovation Organization	
Date of Report (check of	ne):		
April 25, 2018	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
complete to the best of n	~ ~	lief.	nt and each Addendum is true and 9, 2018
(Signature of lobbyist)			(Date)
Leann Moccia (Print Name of lobbyist)			

State of New Hampshire

Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partn	ership, firm, or corpor	ration: Legislative Solution	ns, L.L.C.
Name of Client (leave b	ank if Statement is fo	r the partnership, firm, or	corporation and not related to a
particular client):	Biotechnology Inno	vation Organization	
Date of Report (check o	ne):		
April 25, 2018	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
,			
I have read RSA 15, RS the following Addendur submitted):	A 15-B, RSA 664, the ns submitted with the	ne Statement of Income and Statement (insert the nu	d Expenses described above, and amber of Addendum forms being
Addendum A(s)			
Addendum B(s)			
Addendum C(s)			
complete to the best of r		ief.	9, 2018
(Signature of lobbyist)			(Date)
Chris Herr (Print Name of lobbyist))		